PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

50495.00003

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			23				Γ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			23 minus 20=		• 3			X\$ 9=	27-00	OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =		*)			X40=	40-00	OR	X80=	· · · · · ·
MU	ILTIPLE DEPEN	IDENT CLAIM P						+135=		OR	+270=	
* If	the difference	in column 1 is	less than zero, enter "0" in column 2			olumn 2		TOTAL	422	OR	TOTAL	
CLAIMS AS AMENDED - PART II									,		OTHER	
_		(Column 1) CLAIMS	(Colur					SMALL E	NTITY	OR	SMALL	ENTITY
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVI	IEST BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent FIRST PRESE	* NTATION OF MI	Minus	***	F CL AIM	=		X40=		OR	X80=	
L				LitoLit	OE/ 1111.		1	+135=		OR	+270=	
							1.	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)											AUDII. FEEI	
AMENDMENT B		CLAIMS		HIGH	(EST		lΓ		ADDI-			ADDI-
		REMAINING AFTER AMENDMENT		PREVI	BER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						」 ├			On		
							L	+135=		OR	+270=	
								TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu		(Column 3)	_					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=] [X\$ 9=		OR	X\$18=	
	Independent	<u> </u> *	Minus	***		<u> </u>	╽┟	X40=		OR	X80=	
Ļ	FIRST PRESENTATION OF MULTIPLE DEPENDENT						』├	+135=				
•	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+270=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The "Highest Nun	nber Previously Pa	id For" (Total o	Independ	lent) is the	highest number	er fou	nd in the app	ropriate box	k in co	lumn 1.	